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CONFIRMATION NO. 9828

SERIAL NUMBER 10/636,084	FILING OR 371(c) DATE 08/06/2003 RULE	CLASS 607	GROUP ART UNIT 3766	ATTORNEY DOCKET NO. 141410.00001
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APPLICANTS

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**** CONTINUING DATA *******

This application is a CIP of 10/054,092 01/22/2002 PAT 6,671,559 which claims benefit of 60/263,600 01/23/2001

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED SMALL ENTITY ****
**** 11/05/2003**

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after
Verified and Acknowledged	<i>Mark Bell</i> Examiner's Signature <i>MB</i> Initials
STATE OR COUNTRY	NC
SHEETS DRAWING	5
TOTAL CLAIMS	10
INDEPENDENT CLAIMS	2

ADDRESS

25207

TITLE

Transcanal cochlear implant system

FILING FEE RECEIVED 600	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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